

P E R M I T

CITY OF NAPOLEON
255 W. RIVERVIEW AVE
NAPOLEON, OHIO 43545

DIVISION OF BUILDING & ZONING
PH (419) 592-4010
FAX (419) 599-8393

PERMIT NO: 99351

DATE ISSUED: 09-29-99

ISSUED BY: NBS

JOB LOCATION: 317 CLIFF ST

EST. COST: 2200.00

LOT #:

SUBDIVISION NAME:

OWNER: CUPP, JUNE
ADDRESS: 317 CLIFF ST
CSZ: NAPOLEON, OH 43545
PHONE: 419-592-1252

AGENT: DAMMAN PLBG & HTG
ADDRESS: N-033 CO RD 17D
CSZ: OKOLONA, OH 43550
PHONE: 419-758-3116

USE TYPE - RESIDENTIAL:

OTHER:

ZONING INFORMATION

DIST:	LOT DIM:	AREA:	FYRD:	SYRD:	RYRD:
MAX HT:	# PKG SPACES:	# LOADING SP:		MAX LOT COV:	

BOARD OF ZONING APPEALS:

WORK TYPE - NEW:	REPLMNT: X	ADD'N:	ALTER:	REMODEL:
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WORK INFORMATION

SIZE - LGTH:	WIDTH:	STORIES:	LIVING AREA SF:
GARAGE AREA SF:	HEIGHT:	BLDG VOL DEMO PERMIT:	

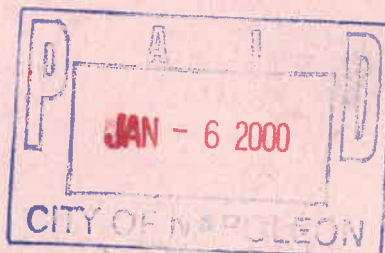
WORK DESCRIPTION
FURNACE REPLACEMENT

FEE DESCRIPTION	PAID DATE	FEE AMOUNT DUE
MECHANICAL PERMIT		5.00

TOTAL FEES DUE 5.00

DATE

APPLICANT SIGNATURE



Please complete this form for each job.

Fill areas marked *

CITY OF NAPOLEON OHIO PERMIT APPLICATION

THIS APPLICATION IS FOR RESIDENTIAL CONSTRUCTION INCLUDING BUILDING, ELECTRICAL, PLUMBING, MECHANICAL, DEMOLITION, REMODELING.

* DATE 9/24/99 * JOB LOCATION 317 cliff st.

LOT # _____ SUBDIVISION NAME _____

* OWNER Jane Cupp * PHONE 592-1250

* OWNER ADDRESS 317 cliff st * CITY Napoleon * ZIP oh

* CONTRACTOR Dammann p/b, Htg. A/c * PHONE 758-3116

* CONTRACTOR ADDRESS N-033 Co. Rd 170 * CITY Kolona * ZIP 43550

CONTRACTOR FAX # _____ CELL PHONE (Opt.) _____

* DESCRIPTION OF WORK TO BE PERFORMED: Install concord 90 + gas furnace

* ESTIMATED COST OF WORK TO BE PERFORMED: 2195.00

WORK INFORMATION

BUILDING: Basement Floor Area _____ Sq. Ft. 1st Story Living Area _____ Sq. Ft.

2nd Floor Living Area _____ Sq. Ft. Garage Floor Area _____ Sq. Ft.

BUILDING SIZE: Length _____ Width _____ Stories _____ Height _____ DEMO VOL _____

Masonry Contractor Address _____ City _____ Phone _____ St _____ Fax _____ Zip _____

Electrical Contractor Address _____ City _____ Phone _____ St _____ Fax _____ Zip _____

Plumbing Contractor Address _____ City _____ Phone _____ St _____ Fax _____ Zip _____

Heating Contractor Address _____ City _____ Phone _____ St _____ Fax _____ Zip _____

Insulation Contractor Address _____ City _____ Phone _____ St _____ Fax _____ Zip _____

Other Contractor attach information.

ZONING INFORMATION (to be completed by City): District _____ Lot Dimensions _____
Lot Area _____ FRSB _____ SYSB _____ RYSB _____ Max Ht _____ ft Max Cov _____ %

I, by signing herein, agree to comply with all applicable City of Napoleon Codes & Ordinances while performing the work herein described. I understand that all work for which a permit is issued is required to be approved by the Building Department of the City of Napoleon.

* Applicant Signature Jeanne Kitcher * Date 9/24/99

Plat of Survey

File 317.

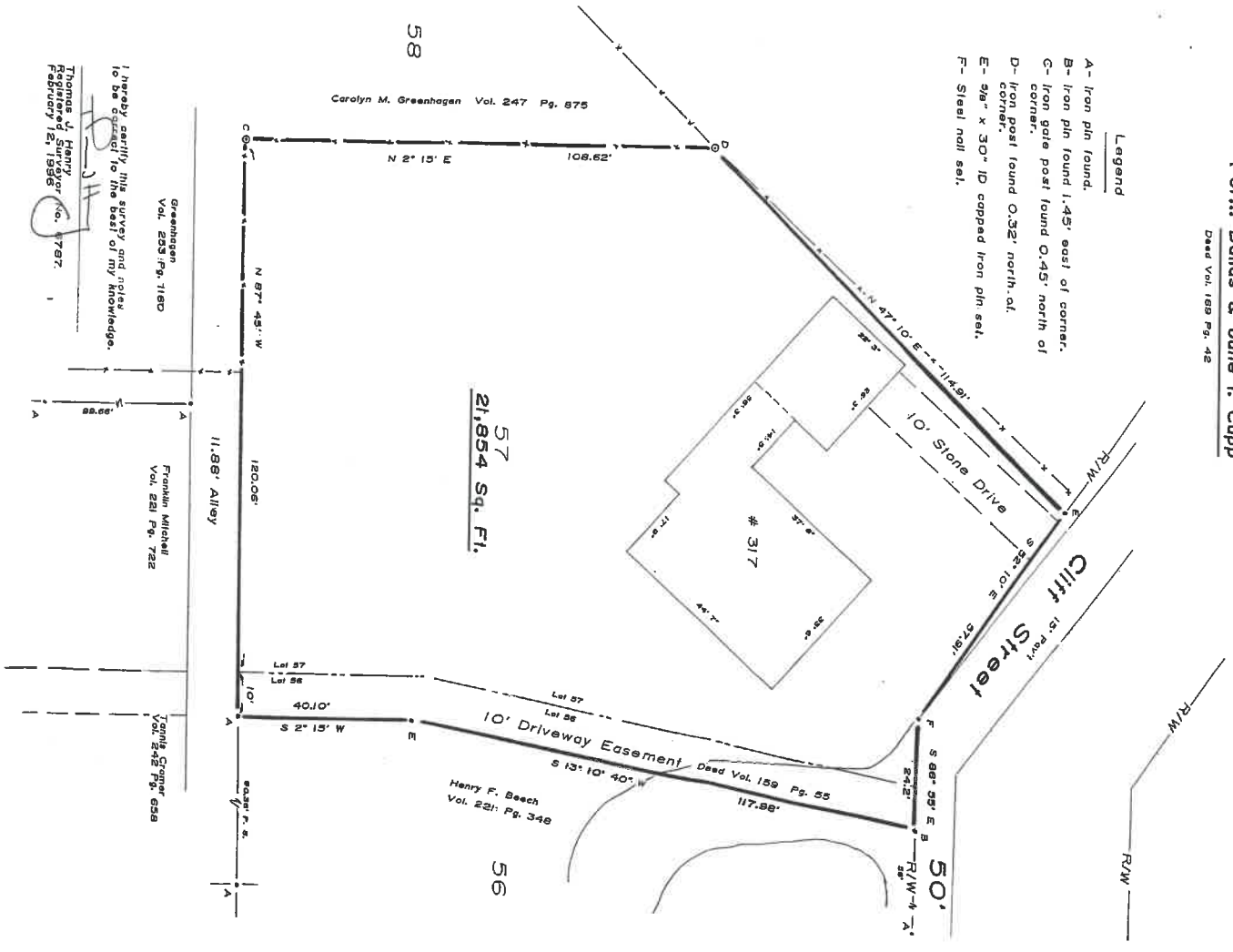
Being a part of Lot No. 56 and Lot No. 57 of L. G. Randall's 1st Addition to the City of Napoleon, Ohio.

For... Dallas & June I. Cupp

Deed Vol. 189 Pg. 42

Legend

- A - Iron pin found.
- B - Iron pin found 1.45' east of corner.
- C - Iron gale post found 0.45' north of corner.
- D - Iron post found 0.32' north of corner.
- E - 3/8" x 30" ID capped iron pin set.
- F - Steel nail set.



57
21,854 Sq. Ft.

56

58

Carolyn M. Greenhagen Vol. 247 Pg. 875

Dead Vol. 159 Pg. 55

Henry F. Beach Vol. 221 Pg. 348

Greenhagen Vol. 203 Pg. 1180

Frankin Mitchell Vol. 221 Pg. 722

John C. Gagner Vol. 248 Pg. 658

I hereby certify, this survey and map to be correct to the best of my knowledge.

Thomas J. Henry
Registered Surveyor No. 8787
February 12, 1988